



The Examiner

Naval Hospital Twentynine Palms

"Serving with Pride and Professionalism"

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An Award Winning Publication

May 1999

Hospital Executive Officer receives Legion of Merit Medal



Captain Douglas H. Freer, Executive Officer, Naval Hospital Twentynine Palms, received the Legion of Merit Medal from BG Gen. C.L. Stanley, CG, Twentynine Palms.

Navy Surgeon General pays visit to Naval Hospital Twentynine Palms

*By Dan Barber, Public Affairs Officer
Naval Hospital Twentynine Palms*

On March 5, Vice Admiral Richard A. Nelson, MC, USN, Surgeon General of the Navy paid a courtesy visit to the Marine Corps Air Ground Combat Center.

During his stay at Twentynine Palms VADM Nelson took the opportunity to eat break-

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Hospital preps for Y2K

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In a recent ceremony held at the Combat Center's Parade Field, the Executive Officer of Naval Hospital Twentynine Palms was presented with the Legion of Merit. The medal was presented to Captain Douglas H. Freer, MC, USN, by BG Gen C.L. Stanley, Commanding General of Marine Corps Air Ground Combat Center, Twentynine Palms.

The citation reads as follows, "The President of the United States takes pleasure in presenting the Legion of Merit to Captain Douglas H. Freer, Medical Corps, United States Navy for service as set forth in the following Citation.

For exceptionally meritorious conduct in the performance of outstanding service while serving as Command Surgeon, I Marine Expeditionary Force, Marine Forces Pacific Camp Pendleton, California, from July 1996 to September 1998. During this period, Captain Freer distinguished himself by his exceptional leadership ability, uncommon vision, and extraordinary devotion. Throughout his assignment he planned and coordinated health service support for numerous joint U.S. Pacific Command, U.S. Central Command, mid U.S. European Command operations and exercises, including: Operation Desert Thunder/Anvil and exercises Bold Endeavor, Native Furry Agile Lion, Kernel Blitz 97, Tempest Express 97 and Ulchi Focus Lens 97. Additionally, Captain Freer was assigned as the Joint Task Force Surgeon for U.S. Central Commands first Consequence exercise, Bold Endeavor, and U.S. European Command's exercise Agile Lion, planning and executing superb medical support for both exercises. Displaying superior initiative and foresight, he produced a benchmark Health Services Support planning document for con-

From the Desk of the Commanding General...

A dialog about our future

By BGen. C. L. Stanley
MCAGCC Commanding General

Recently, we were fortunate to have our Commandant, General Krulak, aboard the Combat Center. Many of you had the opportunity to see or hear him speak about our future, and about his appreciation for the men and women who wear our uniform.

I have to confess that I used his visit, and the audience he commanded, to listen to your questions and concerns. These exchanges caused me to revisit some old issues, and to pick-up on some new ones as well. Thank you once again for your candor, and for giving me the opportunity to better serve you.

Unfortunately, the Commandant doesn't visit us that often, so we must use other means to establish dialogue. One way to get ideas out into the open is through Town Hall meetings. In the past six months, we have held three such meetings, where some issues were immediately resolved. Others have taken a little longer for us to get our arms around.

Regardless of how difficult it is to answer the mail, just being able to openly discuss your ideas is a major investment toward our collective goodwill and quality of life. Some people may hesitate to speak out, fearing that their concerns may be mistaken for complaints. They may even believe that by raising a certain issue, they're putting someone on report. Nothing could be further from the truth.

From where I sit, I see us as a family, where open and honest communications are important for our survival. Yet, my gut tells me that because we're from such varied backgrounds, and because some of us have had some bad experiences communicating with others in the past—that it's just hard to trust an outsider (someone not in your immediate unit or organization). I'm hoping that in time, more of you will feel comfortable with sharing, and with communicating in general.

This is a sensitive, but important subject. It's about trust...trusting each other. When that trust doesn't exist, how do you cope? Do you hunker down and get by until that sunny day when one of you moves on, or do you try to build rapport and trust over time? As you might guess, I'm in the latter camp.

Building rapport and trust are constants for me, and I promise you I will never stop my pursuit of these basic values. I say this fully cognizant of the fact that some people will always hesitate to embrace the basic "trust" that I suggest here. That's regrettable, but it's a fact of life. With that said, it's all the more reason I'm adamant about communicating with you, and Town Hall meetings are just one way to do that.

As I reviewed a list of issues raised during the previous three meetings, I was impressed by the wide range of concerns and comments posed. We hear you, and we're responding.

As a result of your participation in our Town Hall meetings, MWR has expanded

its hours of operation in many of its facilities; for those of you who enjoy swimming in the winter, the Training Tank is now heated; the Auto Hobby Shop is open seven days a week; and the Main Exchange has lengthened its hours of operation. All of these changes came about because you asked about them.

Other issues raised made us re-examine our Facility Maintenance Department's response to service calls; the Child Development Center now operates on a 12-hour schedule; the Military Channel is now broadcast on Combat Center Channel 6; and the number of reserved parking spaces at the Main Exchange have been reduced...to name just a few of the ideas you suggested.

I will continue to host these Town Hall meetings in order to effect positive change, both on base and off base. My dialogue with you is critical to the success of the Combat Center. Talk to me! I'm listening! Help me to help you.

The **EXAMINER** Newsletter is an authorized publication of the U.S. Naval Hospital, Twentynine Palms, CA 92278-8250. The views expressed in this publication are not necessarily those of the Department of the Navy.

Commanding Officer

CAPT. J.M. HUBER, NC, USN

Executive Officer

CAPT. D.H. FREER, MC, USN

Public Affairs Officer/Editor

DAN BARBER

The **EXAMINER** welcomes your comments and suggestions concerning the newsletter. Deadline for submission of articles is the 15th of each month for the following month's issue. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk. The Public Affairs E-Mail address is: tmp1dmr@tmp10.med.navy.mil. The Public Affairs Office telephone number is: DSN 957-2362, Comm (760) 830-2362, Fax: (760) 830-2385.

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The **EXAMINER** editor would like to thank all those who participated in this edition.

TRICARE Provider Locator Line now available for TRICARE Standard Users

Are you a TRICARE Standard user and constantly searching for numbers and locations for health care providers in your area? Your troubles have just been eased as a new toll free number is available to help you locate TRICARE certified providers.

Northern CA (877)773-5451

Southern CA and Yuma, AZ (877)773-5450

Alaska and Hawaii (877)773-5452

Once calling the number appropriate for your area a representative will ask you for the medical service that you are seeking and your zip code. This information will allow them to give you a list of up to three certified providers that will fit your needs.

Don't forget that when you use TRICARE the provider must understand the billing rules and TRICARE certified or TRICARE will not pay for any part of your care.

From the Desk of the CO...

Another Success Story

Recently I received the letter that follows from a very satisfied customer – one of our own staff members. I felt the thoughts that Petty Officer Watts expressed were really important, so I wanted to share them with all of you.

I spoke with MS3 Watts shortly after I received this letter and she related a number of specific examples when someone's little act of thoughtfulness made such a difference to her when she was anxious or in pain.

I agree with her observation that everyone's role effects the patient. Although many of us in the command have jobs that are "behind the scenes" and we believe are invisible to the patient, they have an enormously significant impact on the patient's experience.

As Petty Officer Watts observed, every job in the command is important.

Her observation about that first diet tray after surgery should bring the point home to everyone: There are no insignificant positions. I hope all of you can take a lesson from her comments.

We are a team — a very good team. And the little touch of excellence that you bring to your job every day makes a big difference. It may change someone's life, like it did for MS3 Watts. I join her in her comment, "I am so proud to be a part of this team..."

Thank you

Dear Captain Huber,

I just finished reading an etiquette book that told me I should have written this thank you note 24 to 48 hours after my surgery. I personally think it is never too late to say thank you for changing my life!

I tore my ACL 6 to 7 months ago (dancing) and just received the surgery in February 1999. Dr. Locke tried to help me non-surgically by sending me to Physical Therapy. Although painful, it was the best thing for me. I began healing – yet, not enough to live with for the rest of my life.

The day of my surgery, I was very nervous, and this is where my 'Thank You' begins. Every Corpsman, Doctor, Nurse, and Hospital Staff person I came in contact with that morning helped calm me, or put my worries at ease. The Operating Room technicians are not only professional, they truly care. Not once did I believe I was receiving "special" care because I am "Staff." Dr. Locke and his OR Team explained everything, and answered all of my questions through the entire surgery. After surgery, the PACU Team was sensational. The Nutrition Department has never been more appreciated than that day. I never thought ChiliDogs and Fries would taste that good! And, for the rest of my stay, every meal was beautifully prepared and tasted "almost as good as my own cooking." The Multiservice Ward provided the care and support that I never dreamed of. I have no family here in 29 Palms and every staff member that took care of me, or visited, never gave me time

to remember that. They were the Family and Friends I needed.

Captain, this experience has changed my life. The Naval Hospital Twentynine Palms has shown me how important every job in a hospital truly is. This command and its service have put in perspective what an important job each rate plays in the Navy.

I am so proud to be a part of this team that I have decided to become even more of a team player. As of March 23, 1999 I will begin cross-rating to Hospital Corpsman so that I can help someone or be a part of someone's life. I pray that I will receive the same training and customer service that everyone here in 29 Palms has received.

Captain, please understand that this letter can in no way express how I really feel. So, I hope my sincere dedication to changing rates and helping others will.

*Thank You,
Tanieka J. Watts
MS3, USN*

A Note of Thanks

Dear Captain Huber,

I would like to take this opportunity to express on behalf of my husband Larry and I, our heartfelt thanks for the wonderful, professional and caring treatment I received during my hospitalization from 8-10 Feb and again from 13-19 Feb 1999.

You never actually realize how exceptional health professionals are until you are the one receiving their care. Of particular note are the following personnel:

HN Langdon - ER HM3 Bashor - ER LT



Captain Joan M. Huber

Griffin - OB/GYN

Ens Devitt - MSW HN Chua - MSW HN
Delanie - MSW

HN Dawson - MSW LTJG Pollack -
MSW Ens Andrade - MSW

Ens Loshbaugh - MSW Ms. S. Morley -
MSW LCDR Goldberg - DAS

HM1 K. Cipra - PT LCDR Hightower -
X-Ray HMC Jackson - DFA

LCDR Welker - X-Ray HM1 Fayloga -
X-Ray HM3 Handy - X-Ray

HM3 Cerda - X-Ray HM2 Guzman - X-
Ray HM2 Velasquez-X-Ray

HN Coleman - MOR CAPT Arko - Surg
Cl Dr. Goldstein - OB/GYN

For visits and flowers/gifts: Hospital
CPO Mess, HMC Murphy, HM3 Tenney,
Eliza Russell, HM1 and Mrs. Cipra, LCDR
Mann and the Pharmacy Department

I know that there are many more people
that deserve recognition for their outstanding
care and professionalism that I may have
missed, but you and the Command should
be very proud of the exceptional personnel
we have on staff.

*I know that I am!!
Very Respectfully, HMCS Beverly
Maners*

TRICARE info web site

You can find TRICARE news and other information about military health care on-line, on the Department of Defense's Military Health System Web site. You can access the site at: www.tricare.osd.mil. The former address, www.ochampus.mil, is no longer used.

Family-friendly bunch takes care of families at China Lake

By Kathi Ramont
Associate Editor, Rocketeer

CHINA LAKE, Calif. -- New at the Branch Medical Clinic: family practice doctors, full-scope customized care, enhanced laboratory service, new test equipment and more.

Much more. "I'm really excited about this," said LCDR Scott Archer, BMC's officer in charge. "Not only are we able to give our active duty and their families better service, but we're reaching out to help others in the community as well." Archer explained that for the first time in several years, the clinic is properly manned. There are more than 60 people working at the clinic.

"We're becoming more efficient," Archer said. "We've got the people and the equipment to make sure our patients are taken care of appropriately." While there is still no emergency room, clinic personnel won't deny urgent care if needed. Archer says his doctors and corpsmen are well-trained, and in a true emergency they will stabilize and transport the patient. The Navy gives the clinic authority to treat anyone in an emergency.

Archer says that some common misconceptions the local community has are about access to care -- such as, can they get same-day service? Who does the clinic treat? Can they get same-day callbacks? "We're family-friendly," Archer said. "We schedule each doctor with about 15 to 24 appointments per day, that gives each patient more time with the doctor. But we do urge patients to think ahead and see if they really need immediate care, or can it wait?"

New goals at the clinic are to look at each patient's health problems from conception to death and offer comprehensive, personalized, very caring attention -- in a timely manner. "It's our goal to never be later than 20 minutes and to spend more time with the patients," Archer said. He went on to explain that the clinic has new x-ray equipment, new lab equipment, and they are able to do chemistry panels on site -- saving the patient money and time. They've got everything from a new hematology analyzer to new stripes on the patient's parking lot to a new smoking cessation program.

In addition, an orthopaedic doctor from the main hospital at Twentynine Palms is here once a month for active duty and TRICARE-eligible patients, and a physical therapist is here twice a month. "The physical therapy techni-



Fully manned: For the first time in many years, the China Lake Branch Medical Clinic's officer in charge, LCDR Scott Archer (far right) is promoting his staff, including (l-r) HMI Jay Waite, Susan Hammon, LCDR Matthew Carsberg, LT Genola McKay, Ensign Kevin Charges and LCDR Tim Clenney.

cian billet will be filled this spring," Archer said, "and he'll be a fully trained physical therapy technician. We had great support from Loy Vincent at MWR when our physical therapy was done at the gym. Since moving the department our abilities have increased, especially with the equipment loans from Vincent."

"Think of us as a regular doctor's office," said LCDR Tim Clenney, one of the new family practice doctors. "Ask yourself, does my child need to go to the doctor's office or to an emergency room?" Clenney recently finished three years of residency training and then reported to China Lake.

He's taking boards in July and then will be board-certified as a family practitioner. He was a Navy corpsman for six years and has been in the Navy 13 years. He attended the University of Southern Florida at Tampa, did his surgery internship in Portsmouth, Va., and attended the Naval Undersea Medical Institute and the Navy Dive School in Panama City, Fla.

The Clenney family has only been in the

desert for a few months. His wife, Cindy, is a nurse, but currently stays home with their children, Matt and Nicole.

"We want to have an opportunity to take care of all the military families in Ridgecrest," he said. "And that includes working with people on nutrition counseling and helping to manage their diabetes and asthma treatments." As a family practice doctor he treats everything from pap tests to HIV-related problems.

LCDR Matthew Carsberg is the Naval Weapons Test Squadron's flight surgeon and is also a family practice doctor -- one of two of the first military fully-trained family practice physicians. "I'm on call for pilots," Carsberg explained, "but I spend mornings at the clinic and afternoons at the squadron." He said he loves helicopter flying and is still waiting for his first F/A-18 flight. One of Carsberg's goals is to make active duty personnel comfortable with the fact that the family is well taken care of. "Rest assured, we concentrate on the tasks on hand," he

Please see FAMILY on page 8

Chaplain's Corner...

Second Wind

Trust ye in the Lord forever: for in the Lord Jehovah is everlasting strength. (Isa. 26:4)

LT Daniel Dudley, CHC, USNR
Naval Hospital Chaplain

I have heard from those who take running seriously that there often comes a point in their run where they experience a "runners high" or a "second wind", where they receive an unexpected burst of strength and energy. Up until last week the closest thing that I had experienced to a second wind encounter usually took place after dining at Taco Bell. But last week, not only did I run five miles for the first time, but the last three quarters of a mile I experienced a highly unexpected burst of strength and energy. My doubts of this second wind phenomenon have been squelched. I am a believer!

The run was a great experience, but it is what happened after the run that I would like to share with you. Let me give you a snapshot of the week in which this event took place.

Earlier in the week my wife and I had set up an appointment for our youngest son, Brady, at Loma Linda Medical Hospital to have a sweat test done to see if he had cystic fibrosis. The test was scheduled for the

end of the week, giving us about four days of anxious waiting.

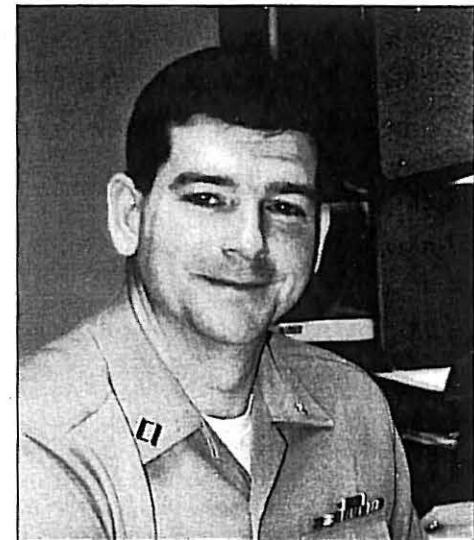
The more research and information that we attained on the condition the more anxious and emotionally taxed we became. The waiting and not knowing process was taking its toll on both of us.

The day before the test, I was doing all I could to remain focused at work. Lunchtime was rolling around and I was looking forward to going out to run, to help take my mind off my worries and relieve tension.

For about a month Carol Gaidis and LT Trevino had been challenging me enough to where we were running about three miles at lunch. On this day Carol and I started off running behind the hospital for what I thought would be our three-mile run. At about the two-mile mark the Executive Officer caught up to us as he was heading out for his ten-mile run. Carol had some business to discuss with the XO so they decided just to take care of it on the run. I was just thankful they didn't need my input because I was doing all I could to breathe.

As the meeting progressed I noticed that we were getting farther and farther from the hospital. I was praying this would not be a ten-mile meeting. As Carol glanced back to check on the status of the Chaplain, I stated "You know if we go much further, I am going to have to call the duty driver to pick me up". Well, we got our five-mile run in and the XO did his ten and the rest is history.

The exhilaration of the run had helped me to think less about our son's up-coming test. However, as soon as I went to the quiet locker room my mind and heart snapped back to the posture of a frightened and weary father. I used this peaceful moment to continue to pray through this time of trial. In the midst of my prayer, I was overcome with a feeling of calming peace. In the still of the moment God spoke to my heart, affirming "just as you received a boost of energy and strength during your run, I am your second wind when you become weary through out life".



LT Daniel Dudley

In this moment of revelation, I was reminded of Jesus' words in the book of Matthew; the 11th chapter where he promises rest to those who are weary and burdened. Later, I found a text in Isaiah 40:29 that states "He giveth power to the faint; and to them that have no might He increaseth strength".

Well, Brady passed his test and is doing well. And I have a whole new perspective on the second wind experience.

I am truly a believer!

Attention All Military Women, Past and Present!

Are you currently in or have you served in the United States military and would like to be recognized for your service? The Women in the Military Service for America Memorial Foundation, Inc. is currently trying to register all servicewomen, past and present. At this time only 260,000 of the 1.8 million women who are eligible have registered. This is only 15% of the population that can be registered.

To get registered for this wonderful opportunity and ensure that military women receive the recognition that they deserve, just call or email the following locations:

1-800-222-2294

(703) 533-1155

FAX (703) 931-4208

Or email wimsa@aol.com

For more information on this contact this web page:
<http://www.womenmemorial.org>

Hail & Farewell

Hails for May 1999

MS3 C. Garcia	HM1 P. Shaffer
HM3 C. Breedlove	HM3 K. Lemire
HM1 S. Crowder	LTJG P. Patillo
HN M. Bjork	LCDR M. Gauron
HN M. Blanco	

Farewells for May 1999

HM2 J. Patterson	HMCS B. Maners
MS3 M. Piotrowska	HM3 R. Brooks
HM2 R. Locquiao	HM3 K. Kocienski
HM3 O. Fregoso	HM3 C. Jacko
HM3 D. Sestito	

New Family Member

Ensign Andrade and wife Daphne had a son, Branden Michael Andrade. 4/8/99
7lbs 8oz

VISIT...

Continued from page 1

fast and chat with the Chief Petty Officers of the Marine Corps Air Ground Combat Center (MCAGCC) Battalion Aid Station and the hospital.

In his remarks, the Surgeon General spoke of his philosophy of where Navy Medicine is today. "If we do our prevention well enough, then we'd keep people from getting sick and going to the hospitals. We are coming closer to that now," said VADM Nelson. "Our real push now is Health Promotion on the front end. We need to see what the life-styles folks have that we can intercede with to prevent illness... such as smoking cessation classes, anthrax vaccinations, immunizations for our children and other prevention programs. We have to pay attention to the things that are easy to do and are cheap in preventing illness," he said. "We have to show our patients that we are checking on them before they come to see us after they are sick," he added.

We have to show our patients that we are checking on them before they come to see us after they are sick

The Surgeon General touched on the importance of Health Promotion because of the effects of downsizing and the Navy's need to work smarter. "We are hurting for manpower. Everytime we get a guy on the medical list we've got a job going undone... we can't afford that. It is up to you and me to keep these guys healthy... to keep checking on them so they can stay as healthy as they can be for as long as they can be," he said. "It's a continuum of care, you have to look at the patients not as an individual illness, but as a whole person, whole life. If we can do this, then we will be seeing our patients at the right level of care," said VADM Nelson.

After breakfast, the Surgeon General paid a courtesy call on Commander Bixlar, DC, USN, Commanding Officer of 23rd Dental Company at the Combat Center. He then visited with Brigadier General Stanley, USMC, Commanding General of MCAGCC.

Following his visit with the General, he headed back to the hospital where he en-

joyed a buffet lunch with medical officers, from both the hospital and greenside, where the general topic of conversation was wellness programs, TRICARE and how it effects readiness, and the status of residency programs for Medical Corps Officers.

During the afternoon VADM Nelson was given a computerized presentation on the hospital and its strategic planning by Commander William Mock, NC, USN, Head, Management Information Department. This presentation was followed by a tour of the hospital where staff members were given the opportunity to meet the Navy's Surgeon General.

VADM Nelson is no stranger to Naval Hospital Twentynine Palms. While assigned as Commander, Naval Medical Center San Diego, California from 1993-98, Admiral Nelson also served as the Lead Agent of TRICARE Region Nine, which this hospital has played an active part in. In 1994, five of the eight committees for TRICARE Region Nine were chaired by Naval Hospital Twentynine Palms staff members.

Vice Admiral Nelson's biography reads as follows:

"Vice Admiral Nelson became the thirty-third Surgeon General of the Navy and Chief, Bureau of Medicine and Surgery on June 29, 1998.

A native of Perkins, Oklahoma, Admiral Nelson received a Bachelor of Science degree from Oklahoma State University and a doctor of medicine degree from the University of Oklahoma. He did his internship at Baptist Memorial Hospital, Oklahoma City, and a residency in occupational medicine at the University of Cincinnati.

After entering the Navy in 1967, he spent a short time at Naval Hospital, Corpus Christi, Texas, then served as senior medical officer at the Naval Ammunition Depot, McAlester, Oklahoma. He also served as a medical officer at Naval Hospital, Bremerton, Washington, and Head of the

Occupational Medicine Branch, Bureau of Medicine and Surgery in Washington, DC.

After an assignment with the Navy Environmental Health Center in Cincinnati, Ohio, he returned to Bremerton as the Director of Occupational and Environmental Health Services and Fleet Liaison Team coordinator for the Naval Regional Medical Center. Other concurrent assignments in Bremerton included Head of the Medical Department while the Naval Submarine Base, Bangor, Washington was being commissioned, and Medical Department Head at Puget Sound Naval Shipyard.

His other assignments include Commanding Officer of the Navy Environmental Health Center in Norfolk, Virginia; Director, Occupational Health and Preventive Medicine Division, and the Deputy Commander for Fleet Readiness and Support at the Naval Medical Command in Washington, DC; and Director of the Health Care Review Division for the Naval Inspector General in Washington, DC.

From 1989-91 he served as Commanding Officer, Naval Hospital, Bremerton. In 1991 he returned to Norfolk where he had three concurrent assignments as Fleet Surgeon, U.S. Atlantic Fleet; Command Surgeon, U.S. Atlantic Command, and Medical Advisor, Supreme Allied Command Atlantic. While assigned as Commander, Naval Medical Center San Diego, California from 1993-98, Admiral Nelson also was the Lead Agent of TRICARE Region Nine.

He is certified in Occupational Medicine by the American Board of Preventive Medicine and is a member of the American College of Occupational and Environmental Medicine and the Association of Military Surgeons of the United States. His personal awards include the Distinguished Service Medal, Defense Superior Service Medal, Legion of Merit (three awards), Meritorious Service Medal and the Navy Achievement Medal."

MEDAL...

Continued from page 1

sequence operations receiving high accolades from Atlantic Command, Marine Forces Pacific, and Pacific Command for its thoroughness in improving operational planning. Captain Freer enhanced the force's medical readiness and training while implementing a Health Service Support mission essential task list for the command. By his exceptional ability, initiative, and total dedication to duty, Captain Freer reflected great credit upon himself and upheld the highest traditions of the United States Naval Service."

The citation was signed by the Commandant of the Marine Corps for the President of the United States.

Personal Satisfaction

By HM2 Anita Bouges

Have you ever come across something or heard something that was just so good that you just had to share it?

I have, and it is all about what I learned at the Stephen Covey Workshop titled "The Seven Habits of Highly Effective People." Odds are, you may have heard a little something about Steven and his insightful techniques on how to progress through life in a positive manner. His "Seven Step" philosophy is based on what he calls "the Maturity Continuum". It's easy to understand and easily put to use. When you apply his concepts to your daily life, you can see results in those around you and within yourself almost immediately.

Two dynamic facilitators, HM3 Charles Hickey and Mrs. Karen Young presented the course. Together they put forward an impressive and informative presentation. You could see how they truly believed in what they were presenting.

After completing the course, I felt empowered and began to look at my life as a series of my choices. Instead of feeling like I was at the whim of my surroundings, I realized that I had ownership over everything that had happened to me. How I viewed a situation, how I choose to act or react in a situation, whether it was internal or external, was all up to me.

The first three "Maturity Continuum" key points in his book are "Being Proactive and not Reactive", "Begin With The End In Mind" and "Put First Things First". Each one of these key points has several logical steps to achieve mastery of one's self.

I will not go on and on with details. But if you want to be happier with your life, argue less with your spouse, or child, or even improve communications at your work site, then this course is something that would be worth your while.

The next time you hear about Stephen Covey and "The Seven Habits of Highly effective People" check it out. Make it your personal challenge to improve social, psychological and emotional well being.

1999 Ridge Run Planned for June will test strength

By HM3 Donna Tenney
Staff Writer

Just when you think you're in top shape, along comes a challenge that yells at you, "Are you sure you're in shape?"

The 1999 Hospital Corpsman Birthday Celebration Committee has set the date for the 14th Annual Ridge Run to be held on Friday, June 4.

This year's race organizers have set out to make this year a memorable, and painful one.

Race organizers have a new course that consists of five miles of extremely uphill, sand filled challenges, guaranteed to test the best. This course will ask competitors to test their threshold of pain and dare them to quit.

There are nine separate age categories, which are divided into male and female divisions. There is also a platoon division for those that think they can make the race as a mass.

This race is open to all active duty, dependents, and civilians. Entry fee is \$12 per individual until May 1 and then \$15 after that.

This entry fee includes a t-shirt. Platoon competitors pay \$2 per person, or \$3 after May 1, but does not include a t-shirt.

All proceeds will go to benefit the 1999 Hospital Corps Ball Celebration to be held in mid June.

Medals will be awarded to the top finisher in each age group, male and female category, and platoon.

So if you decide you want to run with the big dogs, sign yourself up for the 1999 Ridge Run.

Contact HM2 John Pepas at 830-2207 or HM2 Nimmons at 830-2279 for more information.

Patient Administration Department First to Meet BUMED's Deadline

By HM3 Donna Tenney
Staff Writer

We all know that the Patient Admin Department is one of the busiest areas in the command providing a wide variety of services from birth certificates and maintenance of medical records, to decedent affairs and admissions. Just when they did not have enough to do they went out and met a challenge given by BUMED to implement the placement of a new patient documentation form in all adult outpatient medical records.

The Put Prevention into Practice (PPIP) Form, DD2766 is a result of a national campaign developed by the Office for Disease Prevention and Health Promotion, and Department of Health and Human Services. This form will help to improve the delivery and accurate documentation of clinical preventive services. This includes screenings, health counseling, and immunizations.

NHTP Patient Administration Department is the only military treatment facility that has successfully completed the task by the April 30 deadline given by BUMED. On March 24, the Patient Administration Department completed over 1,200 records in just a few hours.

LTJG Hayworth, Assistant Department Head of the Patient Administration Department stated that, "This Mission was accomplished through the teamwork of dedicated Patient Administration Department staff that make NHTP an outstanding military treatment facility."

Bravo Zulu to the Patient Administration Department on a job well done. You make NHTP look good.

Here's To Your Health...

May is National Fitness and Sports Month

Celebrating Fitness Month

In the United States, May is National Fitness and Sports Month. It's a coast-to-coast celebration of fitness jointly sponsored by the President's Council and various private sector agencies, organizations, and corporations. Launched in 1983, and supported by the U.S. President and Congress, this annual campaign calls attention to the many local programs that provide opportunities for people of all ages to get in shape.

Highlight Your Fitness Program

Under the theme "Shape Up America," business and industry, government, schools, and recreation centers highlight their many programs and join forces to focus on the many benefits of regular exercise and sports participation. Many people take this time to re-evaluate their fitness commitment or begin anew, joining the millions of people who have made exercise a vital part of their lifestyle.

As you reflect on your fitness program this May, think about ways to invigorate and revitalize your program, setting realistic goals that you will be able to reach and you will enjoy reaching.

First take a good look at your personal fitness plan. Are you achieving the result you want? If it's to trim down, are you seeing changes? If it's to compete, are you improving? Most important, are you enjoying your workouts?

Set at least one new goal for yourself and write it down. You might consider trying a new activity, adding one more day to your weekly program or taking part in a Fitness Month event.

Involve Another Person

If you are satisfied with your own personal plan, celebrate Fitness Month by setting a goal or taking an action that will help another person with their exercise program. Maybe it's a good time to join a family member for an evening walk or encourage your friend to join your exercise class. "Each one, reach one" is a motto that can be acted upon this May.

Setting an example is one of the strongest motivational tools, and by acting out your commitment to exercise you've already set the pace for being a positive role model for others.

Physical Fitness is Ageless

There is some good news on the horizon. You are living longer and that means more years to enjoy the people, places, and activities that make up your life. It also means more reason to exercise regularly, now and as you get older.

While medical advances are extending

the length of life, it is up to you to maintain the quality of your life. One way to do this, of course, is to exercise regularly. Age need not be a barrier, even if you haven't been particularly active in the past. Everyone can enjoy the benefits of regular exercise.

Count The Benefits

For people of all ages, exercise helps reduce the chances of developing such chronic

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Family...

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said.

Carsberg is different in one respect to the other new doctors. He was a doctor before he joined the Navy in 1990. He's a graduate of the University of New Mexico and a regular commissioned doctor. He completed advanced training at Camp Pendleton and, like Clenny, is going before the Family Practitioner Boards in July. He owes the Navy two years and thinks Ridgecrest is just fine. "WTS is very professional," he said. "This is not like other squadrons. It's an interesting job, and there are many added challenges."

Carsberg explained that by his being at the clinic in the morning it increases the assets of the clinic and makes it easier for all the doctors to see more patients. He wants to be busy. "I'd like to increase the scope of practice," he said. He can perform vasectomies, screen for colon cancer and go routine GYN, but no obstetrics. "We're well trained in women's issues," he said, "but unfortunately we can't do OB at the clinic at this time." Carsberg and his wife, Kyrstinn, have three daughters -- Bailey, Mareth and Samantha.

LT Genola McKay has been a general practice medical officer at China Lake since September 1998. McKay works in primary care, and her patients include all ages, from children to senior citizens. "I really like my patients," McKay said with a big smile. She will have opportunity to get to know her patients too, because she will be stationed at the BMC for four years.

She has four years of active duty and

eight years as a reservist behind her. McKay attended Boston University of Medicine and Orlando Regional Medical Center. She also has a master's degree in public health. She is married to Eddie Childs, a traveling spouse, who follows her to her various duty stations. They have two children, Eddie Jr. and Candice.

Ensign Kevin Charles of Fillmore, Calif., joined the Navy in 1986 and graduated from Basic Underwater Demolition Team/Sea, Air Land training in 1987. He made E-7 in less than 10 years. He served on both east coast SEAL teams in Norfolk, Va., as well as on the instructor staff with the Army Special Forces at Fort Bragg, N.C. He graduated from the Navy Physician's Assistant Program in September 1998, with a bachelor's of science degree from George Washington University.

He's part of the Navy's inter-service physicians assistant program at Fort Sam Houston, Texas, and Balboa Naval Hospital in San Diego. He's certified to see babies, active duty, their family members and seniors. Charles and his wife, Mercedes, had their first child, Gabriella, this month and have been at China Lake for three months.

Other health practitioners at the BMC include flight surgeon; Dr. Everett Witzel, a civilian family practice doctor, but for TRICARE-eligible only; Susan Hammon, an adult nurse practitioner; HM1 Jay Waite, an independent primary care duty corpsman; and LT Rowland Rivero, a general medical officer who will arrive in May.

"The bottom line," said Archer, "is that while we have a legal and moral obligation to provide health care, it's more than that. We really do care about our patients."

Around the Navy...

Smart Cards move to DoN CIO

By Kim I. Plyler, DON CIO Public Affairs

WASHINGTON (NWS) — The Department of the Navy Chief Information Officer (DON CIO) has been designated as the lead agent for Smart Card technology.

"Smart Card implementation is crucial to achieving our goals of Revolution in Business Affairs and Information Assurance," said Jerry M. Hultin, Under Secretary of the

Navy.

Smart Card, which is similar in size to a credit card, contains an embedded integrated circuit (IC) chip. Each IC chip contains not only memory storage but also a central processing unit.

"Smart Card will carry a minimum amount of data. Our vision is to use Smart Card as the Cyber ID for accessing web enabled applications. It is imperative that we team with the functional process owners and users to reengineer processes and set up the web enabled applications, information infrastructure and public key infrastructure," said Dan Porter, the DON CIO who is responsible for providing executive leadership and overall

strategy and direction in managing Smart Card implementation within the Department of the Navy.

Currently Smart Cards are being used in the Navy to reengineer business practices, decrease the infrastructure and enhance the potential of military readiness. "It is a time saving tool which will improve the quality of life and help to create a paperless Navy," said Anthony M. Cieri, director of the Navy Smart Card Office.

Smart Cards are in use at several military installations including Hawaii, Naval Training Center Great Lakes, Naval Air Station Pensacola and Fleet Combat Training Center Dam Neck.

The fleet is currently being outfitted with Smart Cards. The Navy plans to upgrade two carrier battle groups and the corresponding Marine units by June 30. The USS George Washington Battle Group has been selected for the Atlantic Fleet and the USS Kitty Hawk Battle Group has been selected as the representative for the Pacific Fleet.

"Smart Card enhances fleet readiness by actually speeding up the deployment process and tracking Warrior Readiness. They're also a great tool for ship's manifesting and accountability ... the perfect tool to help the commanding officer keep track of his troops," said Cieri.

SPORTS...

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diseases as heart disease, high blood pressure, obesity, and possibly arthritis. People who exercise often feel better about themselves and are better able to cope with stress. Studies show that regular exercise may even help you live longer.

There's a popular saying that tells us "everyone should exercise, but older people must." There are many good reasons for making this statement. Studies show that exercise helps increase your metabolism during and after a workout, which may help you live longer.

There's popular saying that tells us "everyone should exercise, but older people must." There are many good reasons for making this statement. Studies show that exercise helps increase your metabolism during and after a workout, which may help keep those extra pounds off.

People who are physically active also report having more energy during the day and more restful sleep at night. With more stamina and vigor you can better enjoy the increased leisure time that accompanies you as you grow older. Also, you'll be better able to keep up with active friends, family, and grandchildren.

Slow The Aging Process

Weight-bearing exercises such as walking, using light weights, and doing low-impact aerobics can help slow down the process of osteoporosis, a deteriorating bone disease common among older adults and especially women. Osteoporosis often is the cause of bone breakage, which can be very serious in older men and women. Weight-bearing exercises also will help improve and maintain your muscle tone and strength,

which will help your posture as well.

Regular physical activity can also help alleviate some of the digestive and bowel function problems you may have as you get older. Stretching exercises increase flexibility in your muscles and joints, easing joint stiffness and increasing your mobility. Getting in and out of a car, up from a chair, and reaching and bending will be easier and the risk of injuring yourself will be reduced.

Although the physical benefits of exercise help maintain your health, it also keeps you independent and self-sufficient. The emotional, social, and psychological benefits of being physically active are equally significant. Taking part in a new activity, or an old favorite, may mean new friends and social activities. Or you may find it more relaxing to exercise alone with your favorite music. Whatever activity you choose, it should be fun and something you look forward to doing.

Before You Start

If you haven't exercised for several years, or have a medical condition which may require special attention, check with your physician before starting an exercise program. Your doctor, or someone knowledgeable in exercise training, will help you design an appropriate exercise program.

Try to establish a routine, a special time, and a place to exercise that is convenient and fits well into your schedule. The activity popular among all ages is fitness walking. This ideal aerobic activity can be done in your neighborhood, at a local track, or in a shopping mall.

Source: President's Council on Physical Fitness and Sports Parlay International

Fleet Hospital FIVE proves 'ready'

By Judith A. Robertson,
Naval Hospital Bremerton Public Affairs

BREMERTON, Wash. (NWS) — Fleet Hospital FIVE from Naval Hospital Bremerton, Wash., recently conducted a week-long exercise at Camp Pendleton, Calif., which tested their ability to quickly prepare a tent hospital.

The 250-member group built a 50-bed portable tent hospital from the floor up, equipped it and had it ready to receive patients in a matter of hours as a part of the evaluation exercise conducted by the Fleet Hospital Operational Training Command.

"I learned that my co-workers are very compassionate, caring people," said nurse Ensign David Parins. "They function more like a family than just a group."

Fleet Hospital FIVE is now the 'ready' team from amongst the Navy's 10 fleet hospitals.

Naval Hospital preps for Y2K

By Dan Barber, Public Affairs Officer
Naval Hospital Twentynine Palms

When the year 2000 hits here in a few months, Naval Hospital Twentynine Palms will be well prepped to not miss a beat in patient care.

"We are in very good shape for Y2K and do not anticipate any disruption of services," said CDR William T. Mock, Head, Management Information Department at the hospital.

The hospital has been preparing for potential Y2K problems for months now. Mock has developed a database contingency plan that has assisted people in all departments of the hospital to identify potential problems with automated equipment they use.

Of concern to the hospital are three primary areas: Y2K compliance with facilities based issues; biomedical equipment and information management or information technology.

"Even if we are certain that a piece of equipment is Y2K compliant, we should still develop a contingency plan just to be sure we aren't caught off guard," said Mock. To ensure we won't be caught unprepared the hospital is planning for another drill of sorts. "We will be testing our equipment and information systems for compliance in the month of June, probably June 16," said Mock. The testing is designed to simulate the actual rollover to the year 2000.

A lot of people still have a great deal of concern relating to the Y2K issue. To alleviate some of those concerns, Mock recently posted some myths and facts on the hospital's e-mail as follows:

Myth: The Year 2000 Problem only affects mainframes.

Fact: The Y2K problem reaches much deeper than only mainframes. Any type of electronic device that uses a date for some type of operation, be it a VCR or your personal computer will be affected. The problem stems from the desire to store a date using only two character fields (00) rather than four (2000).

Myth: The problem will occur at midnight Jan. 1, 2000.

Fact: Actually the problem has already started. One example of this is when a mer-

chant has trouble using a customer's credit card that has an expiration date in the year 2000. This problem has been fixed for the most part, but it is indicative of what we should be looking out for.

Myth: The world as we know it will end Jan. 1, 2000.

Fact: There is a notion that everything electronic will cease to function on the morning of January 1; however, many precautions are being taken to alleviate a possible electronic gridlock. Most large companies are working actively to fix the problem before the notorious date peaks around the corner. The Securities and Exchange Commission now requires year 2000 updates to be included in annual reports as well as quarterly 10k statements. Come March 1, 1999, all publicly held companies must disclose what they are doing to combat the year 2000 problem.

Myth: The problem is easy to understand and straightforward to fix.

Fact: True, in the fact that the basics of year 2000 problem is understood; however the real trouble is locating the places where all of the dates show up. Many of the programs in use today were written years ago and are not Y2K compliant. Because the programs are old, it is difficult for the programmer to remember all the aspects of them. Some people have compared fixing the Y2K problem with replacing a few rivets on the Golden Gate Bridge when you don't know which rivets are broken.

Myth: We do not have a problem because all of our software applications are new.

Fact: This may be true, but just because the software is new doesn't mean it is Y2K compliant. Most major developers for the PC are making sure their software is Y2K compliant, but since there is a myriad of software developers in the world it is very difficult to tell whether software application is compliant. Most of the Mac applications including Adobe Systems and most everything from Apple's subsidiary Claris are already Y2K compliant. These applications run on the Mac OS clock, which is guaranteed to be accurate until the year 2040. Furthermore, the year 2000 problem stems deeper than software applications; it also affects the operation system and hardware. To inquire about whether or not your software is Y2K compliant, you can check our company da-

tabase or contact the company directly.

Myth: The Y2K problem is primarily about how systems are designed.

Fact: True, however, the Y2K problem is also about how the systems are used, maintained, and how they evolve over time. The most difficult problem revolves around the data that has been entered into the system. You might think that all you have to do is to go in and change the data and everything will be OK. This will only bring up two more problems, one being the time involved in changing the data, and, depending on the amount of data, this is probably not feasible. If you managed to alter the data, you would also have to redesign the program used to read and access the data.

Myth: I will have to buy a new computer.

Fact: Most of the computers made within the last year were manufactured with the year 2000 in mind. However some older machines (pre-1998) might have a problem with the BIOS or the CMOS. The BIOS is an instruction set that is encoded into the PC's Read Only Memory or ROM. It's responsible for controlling the system hardware. The CMOS is the hardware component that keeps track of the time and date when the system is turned off. The main problem with the CMOS pre-1998 is that it only uses two character fields for the year instead of four. Your computer may think that 2000 is actually 1900, creating invalid dates throughout your system.

Myth: Planes will start falling from the sky.

Fact: The planes will not cease to function in midair, but they might have some trouble getting off of the ground on time because they rely on air traffic control computers that are date-dependent. And you may have to wait for your luggage once you land. Baggage handling, aircraft load balancing, and airport security all rely on date-dependent systems. If any of these systems go down, it will cause a delay in the flight times and arrivals of the airlines.

Myth: Everyone will be without power.

Fact: The vast majority of us should have power, but there will be some people without it. Most major utility companies are well on their way in dealing with the Y2K problem. Nevertheless, there will probably be brownouts and rolling blackouts for day or

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TRICARE News...

Cancer Trials Expand as DoD Pledges Financial Assistance

By Douglas J. Gillert
American Forces Press Service

WASHINGTON — The Defense Department and National Cancer Institute will soon expand the numbers and types of clinical trials open to TRICARE beneficiaries.

TRICARE-eligible cancer patients since 1996 have been eligible to take part in experimental treatment programs sponsored by the NCI at more than 2,000 locations. This summer, that agreement will expand to include cancer prevention clinical trials.

The DoD/NCI Cancer Treatment Clinical Trials Demonstration allows TRICARE beneficiaries to participate in the latest cancer treatment studies as part of their standard health care benefits. The current agreement gives them access to the cancer institute's Phase II and Phase III cancer treatment trials. Phase II trials provide preliminary information about how well a new drug or therapy works on a particular type of cancer. Phase III trials compare promising new treatments against standard treatments.

As it was first in coverage of cancer treatment clinical trials, DoD will become the first payer in the nation to cover the costs of cancer prevention clinical trials. The plan covers costs for screening tests to determine clinical eligibility and all cancer treatments covered under the demonstration project.

The prevention trials may be of interest to high-risk patients such as those with a

family history of cancer or who've had cancer before, said Air Force LtCol Kathy Larkin, a senior health policy analyst for the TRICARE Management Activity here.

The treatment trials may be a real option for patients when standard treatments have failed or none exists, for instance for certain brain tumors, she said.

Larkin suggested those interested in joining a preventive or treatment trial consult with their doctors, because research needs are usually specific and prone to change. Patients, family members and others can access general information on cancer and clinical trials or obtain an authorization to enroll patients in a trial by calling 1-800-779-3060. Usual TRICARE rules, cost shares and deductibles apply, and eligible patients may receive care outside the TRICARE network.

Active duty families and TRICARE-eligible retirees and their families can participate in the clinical trials in military and civilian clinics and hospitals that provide cancer treatment. Active duty service members should contact their primary care manager to discuss participation in clinical trials.

DoD health administration records show that only 155 TRICARE-eligible beneficiaries had signed up for the trials as of August 1998. Although the number is low, Larkin said, it's important to keep military health care beneficiaries informed of all treatment options open to them. "Our goal is to inform our beneficiaries that they have the choice of this cancer treatment program," she noted.

To this end, TRICARE posts a great deal of information about the cancer trials on the Military Health System Web site www.tricare.osd.mil/cancertrials/

Information also is available by calling the cancer trials demonstration coordinator toll-free at (800) 779-3060 and the Cancer Information Service at (800) 4-CANCER (422-6237).

DoD focuses on making TRICARE simple

By Douglas J. Gillert
American Forces Press Service

WASHINGTON — Military health care quality has never been better, but it's still hard sometimes to see a doctor or get an appointment as Dr. Sue Bailey learned in Southern California March 31.

The Assistant Secretary Of Defense for Health Affairs participated in focus groups with senior military commanders, beneficiaries, and military and civilian health care providers. No problems with the quality of care surfaced in the discussions, but Bailey heard complaints about customer service and how complex and difficult TRICARE is to understand. Yet, she came away from the talks convinced TRICARE has improved military health care overall.

"DoD health care is remarkably better than it was 10 years ago," Bailey said. She cited improved technology, provider training and the emphasis on preventive care as signs military health care is itself, healthier. "The problem is, [TRICARE] is perceived as more complex," Bailey said.

Before TRICARE was implemented in 1995, patients received their care either at military hospitals and clinics or through CHAMPUS-authorized providers. TRICARE offers many more choices for treatment, including 15 beneficiary categories.

While not offering specific remedies, Bailey said, DoD needs to stabilize and simplify TRICARE and raise customer satisfaction.

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even weeks after the New Year is upon us. The good news is that New Year's Day is on a Saturday when power consumption tends to be low compared to the rest of the week, which should make it easier for larger utility companies to cover for the plants that shut down.

Myth: The phones will not work.

Fact: Large telecommunication providers have been tackling the Y2K problem for quite some time. Smaller providers might experience technical issues, but for the most part you should hear a dial tone New Year's Day. Another problem that might occur with

the phone system is with corporate PBX systems, which rely on time and date stamps for voice mail storage and other features.

Myth: The banking system is going to collapse.

Fact: The financial system is in the best shape of any industry. It will not be necessary to pull out all of your money, but it might be wise to take out a one- or two-week supply of cash just to be on the safe side. The best thing to do is to obtain a hard copy of all of your account information. This includes your investments, savings and checking accounts, and also your credit report.

Hard Chargers...

Happy Nurse Corps Birthday...



LTJG Hodges is hard at work on the Multiservice Ward of Naval Hospital Twentynine Palms. May is National Nurses' Month and May 13 is the Nurse Corps Birthday...

Happy Nurse Corps Birthday!



HM1 Chapoco receives his honorary Desert Rat Certificate from Capt. J.M. Huber, Commanding Officer, Naval Hospital Twentynine Palms



HM3 Nay receives a Letter of Commendation from Capt. J.M. Huber, Commanding Officer, Naval Hospital Twentynine Palms.



The MCAGCC Petty Officers Association sponsored the 'Girls with Attitude' basketball team this year.

COMMANDING OFFICER
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